

The Safety Net-work



Notes from the Commissioner

Spring has returned to Kentucky! Like most of you, I suspect, I'd prefer that it stick around, instead of alternating between snow flurries, summery 80 degree days, and dangerous storms, but here we are! The ups and downs are all part of the adventure, I suppose!

The best part of spring, for me, is closely watching the landscape change almost daily. A look out the window into my yard shows me bright yellow forsythia bushes and the hint of purple on the redbud branches. A walk around the neighborhood offers landscaped yards dotted with daffodil and tulip blooms, and a walk in the woods reveals small spring beauties popping up beside the trail.

As we negotiate our pathway through this season, many priorities demand our attention, some new, some returning like the flowers. As I write this, the majority of the state is now in the "green zone" of low COVID transmission rates, providing us some relief as we deliver services in our communities. However, we cannot let down our guard as we serve vulnerable populations. In-house, we are preparing for the new fiscal year that starts in a few short months: FY2023 contracts are working their way through the preparation process; although hybrid schedules continue, the office is seeing staff return and enjoying the camaraderie; we continue to play a major role in national behavioral health conversations through leadership and committee participation in organizations like National Association of State Mental Health Program Directors and National Association of State Directors of Developmental Disabilities Services; and the 2022 General Assembly is nearing its end.

We have planted many seeds over the years. The one silver lining to the pandemic has been the fertile ground created for those seeds, and our reward is to watch them bloom. This year, there were segments of the legislative session that have inspired hope in that regard. As anticipated, several proposed bills were focused on behavioral health. And, while they have not all offered the solutions we sought, the fact remains that mental health has become an important part of the conversation. Once the session adjourns on April 14th, we will begin the work of implementing new initiatives based on new statutes and budgeted funds. As always, staff and stakeholders will be instrumental in the planning and implementation of those and other Department initiatives over the next fiscal year.

It remains my great honor and privilege it is to serve as your commissioner. You are an amazing group of dedicated and caring professionals, and the work you do is critically important to those we serve and our key partners. Thank you for all you have contributed to the success of our department. Please continue to take care of yourselves and your loved ones, and stay healthy and safe!

In closing, "Where flowers bloom so does hope," is a favorite quote from Lady Bird Johnson. I hope that you may carry this thought with you, as I do, as we venture forward into spring, summer and beyond with all of the new opportunities we will experience. #TeamKentucky

Inside this issue:

Notes from the Commissioner

Employee Spotlight:

Paula Brown

Dr. Brenzel Represents KY

Special points of interest

Racial Equity
Trauma & Resilience
9th Annual System of Care Academy
Tharpe Stepping into New Role

Racial Equity:

By: Rashadd Abdurrahman

This has been a busy month with racial equity efforts both within our department and across the cabinet. Lots of good things happening!

Continued on page 2.

Trauma & Resilience:

By: Miriam Silman

The Reality about Resilience: It Doesn't "Feel Good"

Resilience has become a buzzword for getting through the stress many of us have experienced over the last few years. We have been reminded that resilience is a state, not a trait, something we can cultivate, nurture and build, with the right ingredients. Continued on page 2.

Racial Equity: *Continued from page 1.*

The Racial Equity Core Team has made good progress towards updating our action plan and we are looking forward to having an updated plan for the commissioners review by the end of the month. In addition to this critical strategy work, there are many other incredible initiatives around the department worth learning about. One example (of many) is some of the powerful work that KORE is doing and has highlighted in their March newsletter “The KORE News.” Hats off to Dr. Katie Marks and the KORE team for continuously driving racial equity into their programs, policies, and procedures! We hope to be able to highlight examples like this that continue demonstrating how racial equity is something that we are DOING and not just talking about.

Trauma and Resilience: *Continued from page 1.*

We have talked about how to build resilience in ourselves, our friends and family, those we serve, and those we work with. We know resilience can come and go, wax and wane, and that children, the elderly, and even those who have had unthinkable amounts of adversity, trauma or stress can be resilient. And, we know that we can be resilient as individuals, and collectively, even as an organization or system.

We often rely on the American Psychological Association definition of resilience, “the process of adapting well in the face of adversity, trauma, tragedy, threats, or significant sources of stress.” CHFS’s own Dr. Connie Gayle White, Deputy Commissioner in the Department of Public Health has described resilience as “bouncing forward”. And, while both of these definitions are helpful, they probably need a little more explanation.

Perhaps the most important thing to remember is that adapting “well” doesn’t mean that resilience necessarily feels good. Adapting to adversity or trauma means that we get through it, but often there is still difficulty, or distress, or perhaps even pain. While “bouncing forward” means that we continue on the path of life, it may be that the path is different now. To be resilient doesn’t require that we find a silver lining, or find meaning or growth from the adversity or trauma we suffered. And, resilience does not demand that we relinquish anger. Rather, resilience may mean accepting pain, sadness, loss or anger, and still moving forward even when it doesn’t feel good. Bouncing forward may mean learning to live in a new way; resilience means we embrace both the reality of what has happened with the possibility of what is yet to come.

Sometimes we describe resilience as strength. We often see strength as overcoming pain, but the kind of strength that resilience requires may be just the opposite – it may, in fact, be the strength to lean into that pain, to walk through it, to accept it and to continue to walk forward. Resilience is the strength we find to authentically hold and feel heartbreak and hope simultaneously. And, one of the important ways we as humans are able to do that is through support and care from other humans. Relationships build resilience.

In summary, we want to remember that resilience does not mean:

- You are feeling “good” or things are “fine” most of the time
- You find a silver lining in the terrible things that happened
- The pain, sadness, depression, grief, anxiety, overwhelm or other difficult things are gone

Resilience may include:

- Being honest with ourselves and others about all our feelings, including the difficult ones.
- Finding authentic relationships that support us even when we are not at our best
- Recognizing that the adversity, trauma or stress may continue to impact us in body, mind and soul.
- Moving forward with our life even as we hold and experience pain, distress, anger, sadness or overwhelm

Thomas Hubl has provided a wonderful definition of resilience: “Resilience is the capacity to stay related to challenges”. So, the next time you think about resilience, remember that even if you are feeling pain or sadness, overwhelm or grief, acknowledging and feeling those challenges is part of being resilient. Here are some ways to build resilience:





Dr. Brenzel Represents Kentucky as NASHP Expands State Health Policy Expertise with New Academy Members:

The National Academy for State Health Policy (NASHP) today announced 19 new members will join its prestigious Academy of state health policy leaders and the establishment of a new steering committee to focus on child and family health. The new Academy members bring representation from 10 additional states (Arkansas, Florida, Indiana, Kentucky, Maryland, Montana, New Mexico, North Dakota, South Carolina, and Vermont) and include three Medicaid Directors, two Health and Human Services Secretaries, and one state legislator. Ten of the new members represent states with Republican governors, with the remaining nine representing states with Democratic governors.

"I am delighted to welcome such a strong group of new Academy members, and look forward to serving with each of them in the coming year as we work to support states in the development of new policies and programs, sharing best practices, and strengthening partnerships across state agencies and branches of government," said Jane Beyer, Chair of the NASHP Academy's Executive Committee and Senior Health Policy Advisor, Office of the Washington State Insurance Commissioner.

Academy members serve three-year terms with no term limits. In total, there are 62 Academy members representing 34 states, the District of Columbia, and every region of the country. NASHP's work is guided by the Academy's executive committee and four steering committees focused on developing state policy strategies in the following areas:

Behavioral Health, Aging, and Disability: Systems of care for older adults and people with complex care or behavioral health needs, including substance use disorders, behavioral health systems, and behavioral health integration.

Child and Family Health: Maternal and child health (MCH) systems, payment and delivery reform; children and youth with special needs; maternal and women's health; and MCH benefits and coverage.

Coverage, Cost, and Value: Coverage across populations and payers; state employee health plans; prescription drug costs; hospital and health system costs and hospital community benefit investments; and payment and delivery reform.

Population and Public Health: COVID-19 response and mitigation, immunizations, public health modernization, state approaches to addressing health equity, addressing social determinants of health, and oral health.

"We're excited to expand our Academy with new members who bring diverse expertise and insight to our work," said Hemi Tewarson, NASHP's Executive Director. "We have worked diligently to ensure the Academy represents a variety of experts from across the country, across the field of state health policy, and both the legislative and executive branches."

The new Academy members are:

Behavioral Health, Aging, and Disability Steering Committee

Allen Brenzel, Medical Director, Kentucky Department for Behavioral Health, Developmental and Intellectual Disabilities

Annie Ramniceanu, Systems Director, Department of Corrections, Addictions and Mental Health, Vermont

Dave Richard, Deputy Secretary for North Carolina Medicaid

To continue reading the entire article, please visit [NASHP Expands State Health Policy Expertise with New Academy Members \(prnewswire.com\)](https://www.prnewswire.com).



Employee Spotlight:

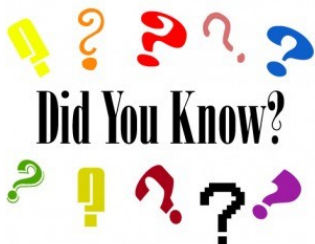
Paula Brown

Let's welcome Paula Brown as the Program Manager for the Prevention & Promotion Branch within the Division of Behavioral Health! Paula comes to this position with more than 17 years of behavioral health prevention experience. She previously served as the Regional Prevention Center Liaison within DBHDID, providing support to the Regional Prevention Center (RPC) directors. In addition, she is currently leading the systems Evidence-Based Workgroup. Prior to taking that position, she served for 7 years as the Director of the Pennyroyal Center RPC. She also served as Project Coordinator of one of the state's Strategic Prevention Framework-State Incentive Grants. In her new role, she will also serve as Kentucky's National Prevention Network Coordinator with NASADAD.

Please join us in congratulating Paula on her new role!

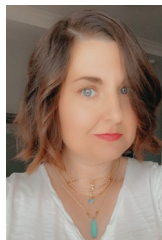
9th Annual SOC Academy New 2022 Save the Date

The Department for Behavioral Health, Developmental and Intellectual Disabilities is hosting the 9th Annual System of Care Academy on September 27-29, 2022. We will re-release the Call for Presentations soon. Please share the Save the Date, and stay tuned for more information.



May is Mental Health Awareness Month.

For additional resources, please visit [Mental Health Month | Mental Health America \(mhanational.org\)](#).



Tharpe Stepping into New Role at DPH

I will be leaving DBHDID on April 15th and going to the Department of Public Health.

During my four years here, I have enjoyed the various working relationships with leadership and colleagues from across the Department. The work of DBHDID is integral to CHFS for both internal and external customers and I wish each of you much success as you continue to provide compassionate and professional services to the citizens of Kentucky!

UPCOMING TRAININGS/ ANNOUNCEMENTS

- May 13, 2022— Recovery Oriented Plan of Safe Care Series
- April 27-29 and May 2-4, 2022— Substance Abuse Prevention Skills Training
- July 12-14, 2022—KY DUI Assessment Instrument Training

The BHDID Update is published quarterly for employees and friends of the Department for Behavioral Health, Developmental & Intellectual Disabilities. News items are welcome and should be submitted to Dr. Shambra Mulder and Laura Cunningham.

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Commissioner: Wendy Morris

Our mission is to provide leadership, in partnership with others, to prevent disability, build resilience in individuals and their communities, and facilitate recovery for people whose lives have been affected by mental illness, intellectual disability or other developmental disability, or substance abuse.